Case 17-11770 Doc 1 Filed 04/13/17 Entered 04/13/17 17:15:48 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Jolanta	
p	pictu	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Kolodziejski	
		itification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-3390	

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Debtor 1 **Jolanta Kolodziejski**

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names In Business name(s)		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
		Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	5736 W. Addison Street	If Debtor 2 lives at a different address:		
		Chicago, IL 60634 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
5.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Document Case number (if known) Debtor 1 **Jolanta Kolodziejski**

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	choosing to file under	■ Cł	napter 7			
		_	napter 11			
			napter 12			
			napter 13			
			•			
8. How you will pay the fe			about how yo	u may pay. Typic attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					Ilments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals to Pay
			I request that but is not req	t my fee be waiv uired to, waive yo	red (You may request this option fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line tha n installments). If you choose this option, you must fill out
						cial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the last 8 years?	■ No				
	iast o years:	⊔ re	s. District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	. Go to li	ne 12.		
		☐ Ye	s. Has yo	ur landlord obtain	ed an eviction judgment agains	st you and do you want to stay in your residence?
				No. Go to line 12	<u>)</u> .	
				Vac Fill out Initis	al Statement About an Eviation	Judgment Against You (Form 101A) and file it with this

Deb	Case 17-		Doc 1	Filed 04/13/17 Document	Entered 04/13/17 17:15:48 Page 4 of 57 Case number (if known)	Desc Main
Part	Report About Any Bu	usinesses `	You Own a	s a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	art 4.		
		☐ Yes.	Name a	nd location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	f business, if any		
If you have more than one sole proprietorship, use a separate sheet and attach			Number	, Street, City, State & ZIP	Code	
	it to this petition.		Check to	he appropriate box to des	scribe your business:	
				Health Care Business (as	defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate	(as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in	n 11 U.S.C. § 101(53A))	
				Commodity Broker (as de	fined in 11 U.S.C. § 101(6))	
			<u> </u>	None of the above		
If you are filing under Chapter 11, the court must know whether you are a small business debtor. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recer a small business debtor, you must attach your most recer operations, cash-flow statement, and federal income tax return or if any of these documents do in 11 U.S.C. 1116(1)(B).		ecent balance sheet, statement of				
	For a definition of small	■ No.	I am not	filing under Chapter 11.		

business debtor, see 11 U.S.C. § 101(51D).

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jolanta Kolodziejski

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 57 Case number (if known) Debtor 1 Jolanta Kolodziejski Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion ■ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jolanta Kolodziejski Signature of Debtor 2

Executed on

MM / DD / YYYY

Jolanta Kolodziejski Signature of Debtor 1

Executed on April 12, 2017

MM / DD / YYYY

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Debtor 1 Jolanta Kolodziejski Page 7 01 57

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Agnes	Pogorzelski	Date	April 12, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Agnes Po	gorzelski		
Printed name			
Agnes Pog	gorzelski & Associates, P.C.		
Firm name			
7443 W. Ir	ving Park Road		
Suite 1W			
Chicago, I	L 60634		
	City, State & ZIP Code		
Contact phone	773-625-0300	Email address	pogorzelski.law@gmail.com
9679357			
Bar number & S	tato		

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rmation to identify your	case:			
Jolanta Kolodziej	ski			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is amended filing
	Jolanta Kolodziej First Name	Tolanta Kolodziejski First Name Middle Name First Name Middle Name	Transition to identify your case: Jolanta Kolodziejski	Transion to identify your case: Jolanta Kolodziejski

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	398,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,089.68
	1c. Copy line 63, Total of all property on Schedule A/B	\$	407,089.68
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	435,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	95,756.76
	Your total liabilities	\$	530,756.76
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,290.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

\$ 0.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this inform	ation to identify	your case and th	nis filing:				
Deb	otor 1	Jolanta Kolo	odzieiski					
		First Name		e Name	Last Name			
	otor 2 ouse, if filing)	First Name	Middle	e Name	Last Name			
Uni	ted States Ban	kruptcy Court for	the: NORTHER	RN DISTRICT OF ILLIN	NOIS			
Cas	se number				-		[Check if this is an amended filing
_		m 106A/E	_					
Sc	chedule	A/B: Pi	roperty					12/15
hink nfor nsv	t it fits best. Be mation. If more wer every questi	as complete and space is needed, on.	accurate as possibl attach a separate s	le. If two married people heet to this form. On the	an asset fits in more than one of a are filing together, both are e e top of any additional pages, want or Have an Interest In	qually responsible	e for sup	olying correct
_			witchle interest in a		land, or similar property?			
. D	o you own or na	ive any legal or eq	juitable interest in a	any residence, building,	iand, or similar property?			
	No. Go to Part 2	2.						
	Yes. Where is	the property?						
1.1				What is the property	? Check all that apply			
	6043 W. Ad	dison Street		☐ Single-family h		Do not deduct sec	ured clain	ns or exemptions. Put
	Street address, if	s, if available, or other description Duplex or multi-unit by				the amount of any secured claims on Schedul Creditors Who Have Claims Secured by Prope		
				_	or cooperative	Creditors who Ha	ve Ciaims	: Ѕесигеа ву Ргорепу.
				☐ Manufactured	or mobile home			
	Chicago	IL	60634-0000	☐ Land	of mobile nome	Current value of entire property?		Current value of the portion you own?
	City	State	ZIP Code	Investment pro	onerty.	\$398.000		\$398,000.00
	City	State	ZIF Code	☐ Timeshare	орону			
				☐ Other				ur ownership interest
				Who has an interest	in the property? Check one	a life estate), if ki		,
				Debtor 1 only		Fee simple		
	Cook			Debtor 2 only				
	County			Debtor 1 and I	•			unity property
					f the debtors and another	(see instructions	s)	
				property identification	ou wish to add about this item, on number:	, such as local		
_	A				Bant 4 to all officers and			

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$398,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1	Case 17-117 Jolanta Kolodzie		Filed 04/13/17 Document	Entered 04/13 Page 11 of 57	8/17 17:15:48 Case number (if known)	esc Main
3. C a	_			hicles, motorcycles		<u> </u>	
	•	o, aoo, aoo. o,	орон анту				
_	No						
-	Yes						
3.1	Make:	Porsche Cayenne		Who has an interest in the	e property? Check one	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
	Model: Year:	2004		■ Debtor 1 only □ Debtor 2 only			Current value of the
		kimate mileage:	180,000	Debtor 1 and Debtor 2 of	only	Current value of the entire property?	portion you own?
	Other i	information:		☐ At least one of the debto	ors and another		
				Check if this is commu	unity property	\$4,026.00	\$4,026.00
5 A	ages yo	u have attached fo	r Part 2. Write t	n for all of your entries fr hat number here			\$4,026.00
Do y	ou own	d goods and furnis	or equitable int	erest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	s. Major appliances,	rumiture, imens,	Ciliia, Kilcileilware			
	Yes. D	Describe					
							\$550.0
		Ho	ousenoia good	ds, bed, table, chairs, o	etc.		\$550.0
E	No	: Televisions and ra		eo, stereo, and digital equip edia players, games	oment; computers, printe	ers, scanners; music colle	ctions; electronic devices
E		es of value s: Antiques and figur other collections,		prints, or other artwork; boolectibles	oks, pictures, or other ar	t objects; stamp, coin, or	baseball card collections;
_		Describe					
E	xamples	nt for sports and he s: Sports, photograp musical instrumer	hic, exercise, an	d other hobby equipment;	bicycles, pool tables, go	lf clubs, skis; canoes and	kayaks; carpentry tools;
	No Yes. D	escribe					
	Firearms Example		otguns, ammunit	ion, and related equipment	i .		
	No Yes. D	escribe					

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Jolanta Kolodziejski 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$450.00 Wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$20.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **First Midwest Bank** \$43.68 Checking account 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership:

Official Form 106A/B Schedule A/B: Property page 3

New Waves, Inc. d/b/a New Waves Cafe

\$1,000.00

%

100

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Case number (if known) Document Debtor 1 Jolanta Kolodziejski New Waves Laundromat Co. 100 % \$1.000.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

	Case 17-11770	Doc 1	Filed 04/13/17 Document	Entered 04/13/17 17:15:48	Desc Main
Debtor	Jolanta Kolodziejski		Document	Page 14 of 57 Case number (if known)	
Ex ■ N	benefits; unpaid loans	ty insurance p	payments, disability bene	efits, sick pay, vacation pay, workers' comper	sation, Social Security
	·				
		e insurance; h	nealth savings account (H	HSA); credit, homeowner's, or renter's insuran	ce
□ Y	es. Name the insurance compa Com	any of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If y so ■ N	neone has died.			d surance policy, or are currently entitled to rece	vive property because
Ex ■ N	amples: Accidents, employmen			t or made a demand for payment to sue	
■ N	o es. Describe each claim		every nature, including	g counterclaims of the debtor and rights to	set off claims
	financial assets you did not o es. Give specific information	alleady list			
				ny entries for pages you have attached	\$2,063.68
Part 5:	Describe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
_ `	ou own or have any legal or equi	itable interest	in any business-related pr	operty?	
■ Ye	s. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
	counts receivable or commiss o es. Describe	sions you alr	ready earned		
Ex ■ N		and supplies outers, softwa	ıre, modems, printers, co	piers, fax machines, rugs, telephones, desks,	chairs, electronic devices
	chinery, fixtures, equipment, o es. Describe	supplies you	u use in business, and	tools of your trade	

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Case number (if known) Document Debtor 1 Jolanta Kolodziejski \$1,000.00 19-year old washers/dryers used by New Waves Laundromat Co. Used oven, tables, chairs, coffee maker, etc. used by New Waves, \$1,000.00 Inc. 41. Inventory ■ No ☐ Yes. Describe..... 42. Interests in partnerships or joint ventures ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ■ No ☐ Yes. Describe..... 44. Any business-related property you did not already list ■ No ☐ Yes. Give specific information....... Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$2,000.00 for Part 5. Write that number here..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Case number (if known) Document Debtor 1 Jolanta Kolodziejski

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$398,000.00
56.	Part 2: Total vehicles, line 5	\$4,026.00		
57.	Part 3: Total personal and household items, line 15	\$1,000.00		
58.	Part 4: Total financial assets, line 36	\$2,063.68		
59.	Part 5: Total business-related property, line 45	\$2,000.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$9,089.68	Copy personal property total	\$9,089.68
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$407,089.68

Official Form 106A/B Schedule A/B: Property page 7 Case 17-11770 Doc 1 Filed 04/13/17 Entered 04/13/17 17:15:48 Desc Main

		1700.11110.		1-1
Fill in this inform	mation to identify your	case:		
Debtor 1	Jolanta Kolodziej	ski		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2004 Porsche Cayenne 180,000 miles Line from Schedule A/B: 3.1	\$4,026.00		\$2,400.00	735 ILCS 5/12-1001(c)
Zine nem conceane / v Z. con			100% of fair market value, up to any applicable statutory limit	
2004 Porsche Cayenne 180,000 miles Line from Schedule A/B: 3.1	\$4,026.00		\$1,626.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale A.B. G.1			100% of fair market value, up to any applicable statutory limit	
Household goods, bed, table, chairs, etc.	\$550.00		\$550.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Wearing apparel Line from Schedule A/B: 11.1	\$450.00		\$450.00	735 ILCS 5/12-1001(a)
Ellio II di II do Acada e 70 E. TTT			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
End from Schodule A/D. 1911			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

description of the property and line on edule A/B that lists this property ecking account: First Midwest hk from Schedule A/B: 17.1	Current value of the portion you own Copy the value from Schedule A/B \$43.68		ount of the exemption you claim	Specific laws that allow exemption
nk	Schedule A/B	Che	ck only one box for each exemption.	
nk	\$43.68	_		
== =			\$43.68	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
•	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
•			100% of fair market value, up to any applicable statutory limit	
= = = = = = = = = = = = = = = =	\$1,000.00		\$760.32	735 ILCS 5/12-1001(b)
•			100% of fair market value, up to any applicable statutory limit	
oject to adjustment on 4/01/19 and every No	3 years after that for ca	ases fi		
	oject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove	you claiming a homestead exemption of more than \$160,37 bject to adjustment on 4/01/19 and every 3 years after that for can No Yes. Did you acquire the property covered by the exemption with the p	you claiming a homestead exemption of more than \$160,375? Digital to adjustment on 4/01/19 and every 3 years after that for cases find the property covered by the exemption within 1	w Waves Laundromat Co. ''s ownership from Schedule A/B: 19.1 w Waves Laundromat Co. ''s ownership from Schedule A/B: 19.2 w Waves Laundromat Co. ''s ownership from Schedule A/B: 19.2 w Waves Laundromat Co. ''s 1,000.00 ''s 1,000.00

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Ca	36 17-11770	Document Document	Page 19	u 04/13/17 17 I of 57	13.40 DESC IV	iaiii
Fill in this inform	ation to identify you					
Debtor 1	Jolanta Kolodzi	ojski				
Debier 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	kruptcy Court for the:					
Officed States Dan	ikiupicy Court for the.	NORTHERN BIOTHOT OF IE				
Case number(if known)					_	if this is an ded filing
Official Form	106D					
		Who Have Claims	Secured	by Property	y	12/15
		f two married people are filing toget out, number the entries, and attach it				
• •	have claims secured by	your property?				
☐ No. Check	this box and submit th	nis form to the court with your other	r schedules. Yo	ou have nothing else to	report on this form.	
_	all of the information I	·		,		
	Secured Claims	0010111				
		nore than one secured claim, list the cre	aditar apparataly	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	a particular claim, list the other creditor cal order according to the creditor's nan	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	ial Bank, N.A.	Describe the property that secures	the claim:	\$435,000.00	\$398,000.00	\$37,000.00
Creditor's Name		6043 W. Addison Street Chi 60634 Cook County	icago, IL			
800 West I Chicago, I	Madison Street L 60607	As of the date you file, the claim is: apply. Contingent	: Check all that			
Number, Street,	City, State & Zip Code	☐ Unliquidated				
Who owes the del	ot? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Del	btor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb		Other (including a right to offset)	Mortgage			
Date debt was incu	rred	Last 4 digits of account num	nber			
Add the dollar va	lue of vour entries in C	olumn A on this page. Write that nun	nber here:	\$435,00	0.00	
	page of your form, add	the dollar value totals from all pages		\$435,00		
Part 2: List Oth	ers to Re Notified fo	r a Debt That You Already Listed	d			
Use this page only trying to collect fro than one creditor for	if you have others to b	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition	a debt that you in Part 1, and th	nen list the collection ag	ency here. Similarly, if	you have more
Name, Numb	er, Street, City, State & 2	. •	On whic	ch line in Part 1 did you er	nter the creditor? 2.1	
Ruff, Freu	R. Freud, Esq. ıd, Breems & Nels Salle Street, Suite			ligits of account number _		

Chicago, IL 60601

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Fill in t	his information to identify your	case:			
Debtor	1 Jolanta Kolodzie	iski			
	First Name	Middle Name	Last Name		
Debtor (Spouse if		Middle Name	Last Name		
(Spouse ii	i, iiiiig) i iist Name				
United :	States Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Case n	umber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106E/F				
	dule E/F: Creditors V	/ho Have Unsecured	d Claims		12/15
				Part 2 for creditors with NONP	RIORITY claims. List the other party to
Schedule Schedule left. Attac	e G: Executory Contracts and Unex e D: Creditors Who Have Claims Se	pired Leases (Official Form 106G). cured by Property. If more space is	Do not include needed, copy	any creditors with partially se- the Part you need, fill it out, nu	operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your
Part 1:	List All of Your PRIORITY U	nsecured Claims			
1. Do a	any creditors have priority unsecure	ed claims against you?			
I	No. Go to Part 2.				
	Yes.				
Part 2:	List All of Your NONPRIORI	ΓY Unsecured Claims			
3. Do a	any creditors have nonpriority unse	cured claims against you?			
	No. You have nothing to report in this	part. Submit this form to the court wit	h your other sche	edules.	
•	Yes.				
unse	all of your nonpriority unsecured of ecured claim, list the creditor separate none creditor holds a particular claim, t 2.	ly for each claim. For each claim liste	ed, identify what t	ype of claim it is. Do not list clair	ms already included in Part 1. If more
					Total claim
4.1	Alexian Brothers Medical C	center Last 4 digits of ac	count number	3409	\$2,025.11
	Nonpriority Creditor's Name				
	22589 Network Place Chicago, IL 60673	When was the de	bt incurred?		
	Number Street City State Zlp Code	As of the date you	ı file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and ar	other Type of NONPRIC	RITY unsecured	d claim:	
	☐ Check if this claim is for a com	•			
	debt Is the claim subject to offset?			ration agreement or divorce that	t you did not
	<u> </u>	report as priority cl		g plans, and other similar debts	
	■ No	•	•	••	
	Yes	Other. Specify	Past due m	edicai dilis	

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Debtor 1 Jolanta Kolodziejski Case number (if know) 4.2 \$224.54 Alexian Brothers Medical Center Last 4 digits of account number 8298 Nonpriority Creditor's Name 22589 Network Place When was the debt incurred? Chicago, IL 60673 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Past due medical bills ☐ Yes 4.3 **Alexian Brothers Medical Center** Last 4 digits of account number 6664 \$38.06 Nonpriority Creditor's Name 22589 Network Place When was the debt incurred? Chicago, IL 60673 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Past due medical bills 4.4 **Bloomingdales** Last 4 digits of account number 4963 \$3,919.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/01 Last Active P.O. Box 8053 When was the debt incurred? 06/14 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Charge Account

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Document Page 22 of 57 Debtor 1 Jolanta Kolodziejski Case number (if know) 4.5 Bogdan J. Kroczek, MD \$1,318.12 Last 4 digits of account number 8447 Nonpriority Creditor's Name 7447 W. Talcott, Suite 221 When was the debt incurred? Chicago, IL 60631 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Past due medical bills ☐ Yes 4.6 Chase Last 4 digits of account number \$7,865.00 Nonpriority Creditor's Name Cardmember Services When was the debt incurred? P.O. Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Numerous credit card transactions over time; Case No.: 10 M1 0150747; personal ☐ Yes Other. Specify judgment 4.7 City Of Chicago Last 4 digits of account number \$3,996.87 3274 Nonpriority Creditor's Name **Department Of Finance** When was the debt incurred? P.O. Box 88292 Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

■ Other. Specify Past due utilities

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Document Page 23 of 57 Debtor 1 Jolanta Kolodziejski Case number (if know) 4.8 \$451.70 Comcast Last 4 digits of account number 9787 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? P.O. Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due utilities ☐ Yes 4.9 Last 4 digits of account number **Farmers Insurance Group** 0001 \$942.19 Nonpriority Creditor's Name P.O. Box 55126 When was the debt incurred? Boston, MA 02205 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due insurance fees ☐ Yes 4.1 John McFarland, Receiver \$20,714.65 Last 4 digits of account number Λ Nonpriority Creditor's Name c/o David A. Weininger, Esq. When was the debt incurred? 200 N. LaSalle Street, Suite 2020 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

Official Form 106 E/F

debt

■ No

☐ Yes

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

John Mc Farland, Receiver v. Jolanta

Kolodziejski, et. al.; Case No.: 17 M1 702352

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Desc Main Document Page 24 of 57 Debtor 1 Jolanta Kolodziejski Case number (if know) 4.1 John McFarland, Receiver \$20,714.65 Last 4 digits of account number Nonpriority Creditor's Name c/o David A. Weininger, Esq. When was the debt incurred? 200 N. LaSalle Street, Suite 2020 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts John Mc Farland, Receiver v. Jolanta Other. Specify ☐ Yes Kolodziejski, et. al.; Case No.: 17 M1 702353 Law Offices of David A. Weininger \$2.056.00 Last 4 digits of account number Nonpriority Creditor's Name 200 N. LaSalle Street, Suite 2020 When was the debt incurred? Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Attorney fees 4.1 **Loyola Medical Center** 0019 \$109.56 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3021 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Past due medical bills Other. Specify

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Page 25 of 57 Document Debtor 1 Jolanta Kolodziejski Case number (if know) 4.1 **Loyola Medical Center** 0011 \$1,338.58 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due medical bills ☐ Yes 4.1 Loyola Medical Center 0012 \$445.17 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3021 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Past due medical bills ☐ Yes 4.1 **Lovola Medical Center** 0013 \$611.89 6 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Past due medical bills

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Document Page 26 of 57 Debtor 1 Jolanta Kolodziejski Case number (if know) 4.1 **Loyola Medical Center** 0014 \$50.46 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due medical bills ☐ Yes 4.1 Loyola Medical Center 0015 \$84.91 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3021 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Past due medical bills ☐ Yes 4.1 **Lovola Medical Center** 0016 \$23.66 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Past due medical bills

Is the claim subject to offset?

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Page 27 of 57 Case number (if know) Debtor 1 Jolanta Kolodziejski 4.2 Macy's 4480 \$3,397.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/95 Last Active P.O. Box 8053 When was the debt incurred? 05/14 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Miramed Revenue Group 6906 \$696.00 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Opened 9/21/16 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.2 Miramed Revenue Group 0475 \$1,973.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Opened 2/18/16 Lombard, IL 60148 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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1 Jolanta Kolodziejski		Case number (if know)	
Miramed Revenue Group	Last 4 digits of account number	1007	\$59.00
Nonpriority Creditor's Name 991 Oak Creek Dr Lombard, IL 60148	When was the debt incurred?	Opened 5/18/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Portfolio Recovery	Last 4 digits of account number	2905	\$5,953.00
Nonpriority Creditor's Name	_		
P.O. Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 11/14 Last Active 02/14	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	, ,	Company Account Nordstrom	
L Tes	— Other. Specify FSD		
Portfolio Recovery	Last 4 digits of account number	1427	\$1,031.00
P.O. Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 12/15 Last Active 07/14	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Πv	Factoring (Company Account World	
☐ Yes	Other. Specify Financial N	letwork Bank	

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Document Page 29 of 57 Debtor 1 Jolanta Kolodziejski Case number (if know) 4.2 **Presence Health** 9949 \$1,188.07 Last 4 digits of account number 6 Nonpriority Creditor's Name 62314 Collection Center Drive When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due medical bills ☐ Yes 4.2 Republic Services 8525 \$380.77 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2608 S. Damen Avenue Chicago, IL 60608 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Past due utilities ☐ Yes 4.2 Southern Glazer's of IL 2554 \$611.53 Last 4 digits of account number 8 Nonpriority Creditor's Name 2971 Collection Center Drive When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Past due shippment fees

Is the claim subject to offset?

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Case number (if know) Debtor 1 Jolanta Kolodziejski 4.2 \$2,703.00 Synchrony Bank/Lord & Taylor 3294 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 03/97 Last Active P.O. Box 965064 When was the debt incurred? 05/14 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 The Bureaus Inc 7941 \$1,113.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 650 Dundee Rd Opened 01/15 Last Active Ste 370 When was the debt incurred? 06/14 Northbrook, IL 60062 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Capital One N.A. ☐ Yes 4.3 Tnb-Visa (TV) / Target \$6.466.00 2847 Last 4 digits of account number Nonpriority Creditor's Name C/O Financial & Retail Services Opened 07/99 Last Active Mailstop BV PO Box 9475 When was the debt incurred? 06/14 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card T Yes

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Women's & Childrens' Health	Last 4 digits of account number					
Nonpriority Creditor's Name	<u> </u>					
800 Biesterfield Road	When was the debt incurred?					
Suite 408						
Elk Grove Village, IL 60007						
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims					
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Past due medical bills					

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which entry in Part 1 or Part 2 did you list the original creditor?

American Recovery Service Inc.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
555 St. Charles Drive, Suite 100 Thousand Oaks, CA 91360		■ Part 2: Creditors with Nonpriority Unsecured Claims					
,	Last 4 digits of account number	8409					
Name and Address	On which entry in Part 1 or Part 2 c	lid you list the original creditor?					
Capital One, N.A.	Line 4.30 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Jane Brity, D. C. 100	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 c	lid you list the original creditor?					
MiraMed Revenue Group	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
991 Oak Creek Drive Lombard, IL 60148		Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number	0475					
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?					

☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

Nationwide Credit & Collection, Inc

Name and Address

Line 4.14 of (Check one):

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Debtor 1 Jolanta Kolodziejski		Case number (if know)
815 Commerce Drive, Suite 270 Oak Brook, IL 60523		Part 2: Creditors with Nonpriority Unsecured Claims
Can 2:001, 12 00020	Last 4 digits of account number	3834
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive, Suite 270 Oak Brook, IL 60523		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oak 6100k, 12 00323	Last 4 digits of account number	3834
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive, Suite 270 Oak Brook, IL 60523		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oak Blook, IL 00323	Last 4 digits of account number	3834
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive, Suite 270 Oak Brook, IL 60523		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oak Blook, IL 00323	Last 4 digits of account number	3834
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Nationwide Credit & Collection, Inc	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
815 Commerce Drive, Suite 270 Oak Brook, IL 60523		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oak Blook, IL 00323	Last 4 digits of account number	3834
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
Nordstrom	Line 4.24 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 6555		Part 2: Craditors with Nappriority Upaccured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

Englewood, CO 80155

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

■ Part 2: Creditors with Nonpriority Unsecured Claims

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 95,756.76
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 95,756.76

Last 4 digits of account number

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		170.11111.		,,				
Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Jolanta Kolodzie	jski						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.2					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.4					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.5					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	

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		Docume	<u>nt Page 34 d</u>	of 57	
Fill in this i	information to identify your	case:			
Debtor 1	Jolanta Kolodzie	icki			
Debtor	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ner				
(if known)					☐ Check if this is an
					amended filing
Sched Codebtors a beople are fill it out, an	nd number the entries in the	re also liable for any deb ally responsible for supp boxes on the left. Attach	lying correct informate the Additional Page t	tion. If more space is need	12/15 as possible. If two married ed, copy the Additional Page, any Additional Pages, write
our name	and case number (if known)	. Answer every question.			
1. Do y	ou have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona No.	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		tes and territories include
in line Form 1 out Co	2 again as a codebtor only i 106D), Schedule E/F (Officia Iumn 2.	f that person is a guarant	tor or cosigner. Make	sure you have listed the co 06G). Use Schedule D, Sch	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Check all schedules th	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line _	
_					
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
<u> </u>	Number Street			_	
	City	State	ZIP Code		

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						•				
	in this information to identify your									
De	btor 1 Jolanta Ko	lodziejski			_					
	btor 2				_					
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number		_			Chec	k if this is	:		
(If kı	nown)					ПΑ	n amende	ed filing		
									g postpetition ollowing date:	
<u>O</u>	fficial Form 106l					M	IM / DD/ \	/YYY		
S	chedule I: Your Inc	ome								12/1
atta	tuse. If you are separated and you che a separate sheet to this form The separate sheet to this form Describe Employment Fill in your employment	. On the top of any additi	ional pages, write yo				imber (if	known). A	nswer every	
••	information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed■ Not employed				☐ Empl	oyed mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
	imate monthly income as of the ouse unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your nor	n-filing
•	ou or your non-filing spouse have n e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for	that perso	on on the li	nes below. If y	you need
						For Deb	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	otor 1	Jolanta Kolodziejski	-	Case	number (if known)				
					r Debtor 1	nor	Debtor	spouse	
	Cop	y line 4 here	4.	\$_	0.00	\$_		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. \$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. \$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	. \$_	0.00	\$		N/A	
	5e.	Insurance	5e.		0.00	\$_		N/A	
	5f.	Domestic support obligations	5f.		0.00	\$_		N/A	
	5g.	Union dues Other deductions, Specific	5g.		0.00	+ \$_		N/A	
_	5h.	Other deductions. Specify:	_ 5h.	· -	0.00			N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$_		N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$_		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. \$	0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	0.00	\$		N/A	
	8e.	Social Security	8e.	. \$	0.00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.		0.00	\$_ \$		N/A N/A	
	8h.	Other monthly income. Specify:	8h.	· -	0.00			N/A	
						· —			
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$_		N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	0.00 + \$		N/A	= \$	0.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							0.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•	•		e <i>J.</i> +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12.	\$	0.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?					Combined monthly i	
		No							
		Voc Evolain:			·	_			7

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Fill	in this information to identify your case:				
	Jolanta Kolodziejski			k if this is:	
	ouse, if filing)		<u> </u>	An amended filing A supplement show 13 expenses as of t	ing postpetition chapter he following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		ī	MM / DD / YYYY	
	se number known)				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are filing togoromation. If more space is needed, attach another sheet to this form. On the mber (if known). Answer every question.	ether, both are e top of any ad	equa ditio	illy responsible for nal pages, write yo	r supplying correct our name and case
Par	rt 1: Describe Your Household				
1.	Is this a joint case? ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separat	te Household of	Debt	or 2.	
2.	Do you have dependents? ■ No				
		nt's relationship or Debtor 2	:0	Dependent's age	Does dependent live with you?
	dependents names.				□ Yes
					□ No
				· -	☐ Yes ☐ No
					☐ Yes
					□ No
_					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are using penses as of a date after the bankruptcy is filed. If this is a supplemental Supplicable date.				
the	clude expenses paid for with non-cash government assistance if you know a value of such assistance and have included it on Schedule I: Your Income fficial Form 106I.)	e		Your expe	nses
4.	The rental or home ownership expenses for your residence. Include first repayments and any rent for the ground or lot.	mortgage	4. \$		250.00
	If not included in line 4:				
	4a. Real estate taxes	4	a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		c. \$		0.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equity to		d. \$ 5. \$		0.00

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Debtor 1	Jolanta Kolodziejski	Case num	ber (if known)	
. Utili	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	80.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.		250.00
	d and nodsekeeping supplies	7. 8.	\$	
_		9.	·	0.00
	thing, laundry, and dry cleaning sonal care products and services		\$	50.00
	•	10.	\$	50.00
	lical and dental expenses	11.	\$	50.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	100.00
	not include car payments.		·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	· ·	10.00
	ritable contributions and religious donations	14.	Ф	10.00
5. Insu				
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	150	¢	0.00
		15a.	·	0.00
	. Health insurance	15b.	· -	440.00
	Vehicle insurance	15c.		0.00
	. Other insurance. Specify:	15d.	\$	0.00
i. Taxe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	·	16.	\$	0.00
	allment or lease payments:			
17a.	. Car payments for Vehicle 1	17a.	\$	0.00
17b.	. Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		-	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spec	cify:	19.		
). Othe	er real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	ur Income.	
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.		0.00
			·	
. Othe	er: Specify:	21.	+φ	0.00
2. Calc	culate your monthly expenses			
	. Add lines 4 through 21.		\$	1,290.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$.,_00.00
			·	4 000 00
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,290.00
3. Calc	culate your monthly net income.		l .	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
	Copy your monthly expenses from line 22c above.	23b.		1,290.00
200.	. Copy your monary expenses from the 220 above.	200.		1,290.00
230	Subtract your monthly expenses from your monthly income.			
230.	The result is your <i>monthly net income</i> .	23c.	\$	-1,290.00
	The local to your monthly not moonle.		<u> </u>	•
4 Day	you expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
4. DO L				or decrease because of
	example, do you expect to finish paying for your car loan within the year or do you expect your	i mortgage i	Jayment to increase	
For e	example, do you expect to linish paying for your car loan within the year or do you expect your ification to the terms of your mortgage?	i mortgage į	Dayment to increase	0. 400.0400 2004400 0
For e	ification to the terms of your mortgage?	i mortgage p	Dayment to increase	0. 400.0400 2004400 0

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Fill in this infor	mation to identify your	case:				
Debtor 1	Jolanta Kolodzie	jski				
	First Name	Middle Name	Last Na	me		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Na	ame		
, ,						
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)					_	if this is an
					amende	ed filing
Official Forr	m 106Dec					
		امينامانينا مرا	Dabtar	da Cabadu	laa	
Declarat	tion About a	<u>an Individual</u>	Deptor	's Scheau	ies	12/15
years, or both. 1	n Below		Tuploy case o	an result in lines up	to \$250,000, or imprisonme	nt for up to 20
5.1						
Did you pa	ly or agree to pay some	eone who is NOT an attor	ney to neip yo	u fili out bankruptcy	torms?	
■ No						
☐ Yes.	Name of person			Į.	Attach Bankruptcy Petition Pre	eparer's Notice,
_	·			I	Declaration, and Signature (Of	fficial Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sum	mary and sch	edules filed with this	declaration and	
X /s/ lol:	anta Kolodziejski		Х			
	a Kolodziejski			ignature of Debtor 2		
	re of Debtor 1		-	_		
Date	April 12, 2017		Da	ate		
_ = = = =	· · · · · · · · · · · · · · · · · · ·					

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Fill	in this inform	ation to identify you	r case:						
_	btor 1								
De	DIOI I	Jolanta Kolodzie First Name	Middle Name	Last Name					
1	btor 2 ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Ca	se number								
(if k	nown)					Check if this is an amended filing			
<u> </u>	·	407							
	ficial For		Affaire for Individ	duals Filing for B	ankruntev	A / A /			
					equally responsible for sup	4/16			
info	rmation. If mo	ore space is needed,	attach a separate sheet to		additional pages, write you				
	<u> </u>). Answer every que							
			rital Status and Where You	ı Lived Before					
1.	What is your	current marital statu	ıs?						
	□ Married■ Not marr	ied							
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?					
	■ No								
	_	s. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. stat					ity property state or territor co, Texas, Washington and V				
	■ No								
	☐ Yes. Mal	ke sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).					
Pa	rt 2 Explair	the Sources of You	r Income						
4.	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including partetogether, list it only once ur		ndar years?			
	□ No								
	_	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips				
			Operating a business		☐ Operating a business				

Official Form 107

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Case number (if known) Document

Debtor 1 Jolanta Kolodziejski

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(bet	oss income fore deductions and lusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	last caler nuary 1 to	ndar year: December 3	31, 2016)	■ Wages, commission bonuses, tips	s,	\$-28,487.00	☐ Wages, com bonuses, tips	missions,	
				Operating a busines	ss		☐ Operating a	business	
		dar year bef December 3		■ Wages, commission bonuses, tips	s,	\$19,307.00	☐ Wages, com bonuses, tips	missions,	
				Operating a busines	ss		☐ Operating a	business	
	and other winnings. List each: No	public benef If you are fili	it payments; p ng a joint case ne gross incor	er that income is taxable, ensions; rental income; e and you have income t me from each source sep	interest; div hat you red	vidends; money colle eived together, list it	cted from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eac (bet	h source fore deductions and lusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: Lis	t Certain Pa	yments You I	Made Before You Filed	for Bankrı	uptcy			
6.	□ No.	Neither De individual puring the No. Yes * Subject to Debtor 1 or	shor 1 nor Decimarily for a perimarily for adjustment for Debtor 2 or go days befor Go to line 7. List below ear include payment for Debtor 2 or go to line 7.	e debts primarily consultations and the primarily consultation of the primarily consultation of the primarily consultation. It is a primarily consultation of the primarily consultation o	consumer deschold purpose, did you purpose upaid a total remarks for this ban years after consumer descriptions upaid a total upaid a total upaid a total upaid a total paid a total remarks after upaid a total upaid a total remarks after the purpose upaid a total upaid a total remarks after the purpose upaid a total upaid a total remarks after the purpose upaid a total upaid a total remarks after the purpose upaid a total upaid a total remarks after the purpose upaid a total upaid upaid upaid upaid upaid a total upaid upa	ebts. Consumer debtose." pay any creditor a total of \$6,425* or more domestic support oblakruptcy case. that for cases filed or ebts. pay any creditor a total of \$600 or more ar	al of \$6,425* or moder in one or more pay gations, such as chan or after the date of al of \$600 or more?	re? ments and the support and	ne total amount you nd alimony. Also, do
			·	his bankruptcy case.					
	Creditor	's Name and	Address	Dates of pa	yment	Total amount paid	Amount you still owe	Was this p	payment for

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an		
	■ No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name		
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Nature of the case Court or agency Case number			Status of the case				
	MB Financial Bank, N.A. v. Jolanta Kolodziejski, et. al. 15 CH 16833	Mortgage Circuit Court of Cook County 50 W. Washington Street Chicago, IL 60602		ton Street	■ Pending□ On appeal□ Concluded			
	John McFarland, Receiver v. Jolanta Kolodziejski, et. al. 17 M1 702252	Forcible	Circuit Court of Cook County 50 W. Washington Street Chicago, IL 60602		■ Pending □ On appeal □ Concluded			
	John McFarland, Receiver v. Jolanta Kolodziejski, et. al. 17 M1 702353	Forcible	Circuit Court o County 50 W. Washing Chicago, IL 600	ton Street	■ Pending □ On appe □ Conclud	al		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes, Fill in the information below.		rty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the		
	Oreuttor Name and Address	Describe the Property Explain what happened		Date		property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becannot be a second by the second bankrup accounts or refuse to make a payment becannot be a second by the second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse to make a payment becannot be a second bankrup accounts or refuse bankr		uding a bank or fir	nancial institution	n, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		

Page 43 of 57 Case number (if known) Document Debtor 1 Jolanta Kolodziejski 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address payment transferred or transfer was Email or website address made Person Who Made the Payment, if Not You CredAbility Consumer credit counseling \$70.00 270 Peachtree Street NW, Suite 1800 Atlanta, GA 30303 **CIN Legal Data Services** \$40.00 Credit report P.O. Box 88588 Milwaukee, WI 53288

Case 17-11770

Doc 1

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Debtor 1 Jolanta Kolodziejski

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone where promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. 				rty to anyone who		
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	airs? he granting of a se				
	Yes. Fill in the details.			-			
	Person Who Received Transfer Address	Description and v			ny property or eceived or debts hange	Date transfer was made	
	Person's relationship to you						
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. 				st or similar device	of which you are a		
	Name of trust	Description and v	alue of the prope	rty transferre	a	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and Stora	age Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accou	nts; certificates of		-		
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was ed, sold, red, or sferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposit l	box or other depos	itory for securities,	
	No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the c	ontents	Do you still have it?	
22.	Have you stored property in a storage unit	or place other than your	home within 1 ye	ear before you	ı filed for bankrupto	cy?	
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S		escribe the c	ontents	Do you still have it?	
		State and ZIP Code)					

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Case number (if known) Document

Debtor 1 Jolanta Kolodziejski

Pai	t 9: Identify Property You Hold or Control for S	omeone Else							
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust					
	No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pai	t 10: Give Details About Environmental Informat	tion							
For	the purpose of Part 10, the following definitions a	pply:							
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	<u> </u>						
_	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	ites.							
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic s	substance,					
Rep	ort all notices, releases, and proceedings that you	ı know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title	Court or agency	Nature of the case	Status of the					
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case					
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business							
27.		-	y of the following connections to any	/ business?					
	<u>_</u>	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership	,	,						
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person

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Fill in this informa	ation to identify your	case:				
Debtor 1	Jolanta Kolodziej					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Banl	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS			
Case number						
(if known)					☐ Check if this is an amended filing	
Official For	m 108					
Statemen	t of Intentio	n for Indiv	iduals Filing U	nder Chapter	7 12/15	
If you are an indivi	idual filing under cha	ntor 7 you must fill	out this form if:			
	claims secured by yo		out this form ii.			
•	d personal property a		-			
	er is earlier, unless th		you file your bankruptcy pet e time for cause. You must a			
	ple are filing togethe	r in a joint case, bot	h are equally responsible fo	or supplying correct inform	mation. Both debtors must	
	nd accurate as possib ur name and case nur		needed, attach a separate s	sheet to this form. On the	top of any additional pages,	
Part 1: List You	ır Creditors Who Hav	e Secured Claims				
For any creditor information below	•	art 1 of Schedule D:	Creditors Who Have Claims	s Secured by Property (Of	ficial Form 106D), fill in the	
	litor and the property t	hat is collateral	What do you intend to do secures a debt?	with the property that	Did you claim the property as exempt on Schedule C?	
Creditor's ME	3 Financial Bank, N	.A.	■ Surrender the property.		■ No	
name:			Retain the property and		☐Yes	
•	6043 W. Addison S		Retain the property and Reaffirmation Agreemen		- 100	
property securing debt:	Chicago, IL 60634	Cook County	☐ Retain the property and	[explain]:		
For any unexpired		ase that you listed				
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).						
Describe your un	expired personal pro	perty leases		Wi	Il the lease be assumed?	
Lessor's name:					No	
Description of leas Property:	ed					
				Ц	Yes	
Lessor's name: Description of leas	ed				No	
Property:	~~				Yes	
Lessor's name:					No	

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	otor 1	Jolanta Kolodziejski	Case number (if known)	
_				
	scriptioi perty:	n of leased	П	Yes
				163
	sor's n			No
	scription perty:	n of leased		Yes
	po.ty.			res
	sor's n			No
	scription perty:	n of leased		Vaa
	porty.			Yes
	sor's n			No
	scription perty:	n of leased		V
1 10	porty.		Ц	Yes
	sor's n			No
	scription perty:	n of leased		
1 10	репу.		Ц	Yes
Par	t 3:	Sign Below		
		aity of perjury, i declare that i have indica lat is subject to an unexpired lease.	ted my intention about any property of my estate that secure	s a debt and any personal
v	/a/ 1	Namta Kaladriaiaki	V	
X		olanta Kolodziejski nta Kolodziejski	X Signature of Debtor 2	
		ture of Debtor 1	0.g. (a.a. 0 0. 200.0. 2	
	Date	April 12, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-11770 Doc 1 Filed 04/13/17 Entered 04/13/17 17:15:48 Desc Main Document Page 53 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	gara Jolanta Kolodziejski		Case No.				
	-	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENS	SATION OF ATTORN	NEY FOR DE	CBTOR(S)			
1.	compensation paid to me within one year before the filing	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that mpensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	2,000.00			
	Prior to the filing of this statement I have received			0.00			
	Balance Due		\$	2,000.00			
2.	\$ of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person un	less they are meml	pers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspects of	of the bankruptcy c	ase, including:			
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 						
7.	By agreement with the debtor(s), the above-disclosed fee d	loes not include the following so	ervice:				
		CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.							
	April 12, 2017	/s/ Agnes Pogorzels	ski				
_	Date	Agnes Pogorzelski					
		Signature of Attorney Agnes Pogorzelski	& Associates. F	P.C.			
		7443 W. Irving Park					
		Suite 1W Chicago, IL 60634					
		773-625-0300 Fax:	773-625-0400				
		pogorzelski.law@g	mail.com				
		Name of law firm					

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United States Bankruptcy Court Northern District of Illinois

In re	Jolanta Kolodziejski	Debtor(s)	Case No. Chapter 7				
		Desici(s)	Chapter				
	VERIFICATION OF CREDITOR MATRIX						
		Number of Creditors:		28			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.						
Date:	April 12, 2017	/s/ Jolanta Kolodziejski Jolanta Kolodziejski Signature of Debtor					

Alexian Brothers Medical Center 22589 Network Place Chicago, IL 60673

American Recovery Service Inc. 555 St. Charles Drive, Suite 100 Thousand Oaks, CA 91360

Bloomingdales Attn: Bankruptcy P.O. Box 8053 Mason, OH 45040

Bogdan J. Kroczek, MD 7447 W. Talcott, Suite 221 Chicago, IL 60631

Brandon R. Freud, Esq. Ruff, Freud, Breems & Nelson, Ltd. 200 N. LaSalle Street, Suite 2020 Chicago, IL 60601

Capital One, N.A.
Bankruptcy Dept.
P.O. Box 30285
Salt Lake City, UT 84130

Chase Cardmember Services P.O. Box 15298 Wilmington, DE 19850-5298

City Of Chicago Department Of Finance P.O. Box 88292 Chicago, IL 60680

Comcast
Bankruptcy Department
P.O. Box 3005
Southeastern, PA 19398

Farmers Insurance Group P.O. Box 55126 Boston, MA 02205

John McFarland, Receiver c/o David A. Weininger, Esq. 200 N. LaSalle Street, Suite 2020 Chicago, IL 60601

Law Offices of David A. Weininger 200 N. LaSalle Street, Suite 2020 Chicago, IL 60601

Loyola Medical Center P.O. Box 3021 Milwaukee, WI 53201

Macy's Attn: Bankruptcy P.O. Box 8053 Mason, OH 45040

MB Financial Bank, N.A. 800 West Madison Street Chicago, IL 60607

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

MiraMed Revenue Group 991 Oak Creek Drive Lombard, IL 60148

Nationwide Credit & Collection, Inc 815 Commerce Drive, Suite 270 Oak Brook, IL 60523

Nordstrom
P.O. Box 6555
Englewood, CO 80155

Portfolio Recovery P.O. Box 41067 Norfolk, VA 23541

Presence Health 62314 Collection Center Drive Chicago, IL 60693

Republic Services 2608 S. Damen Avenue Chicago, IL 60608

Southern Glazer's of IL 2971 Collection Center Drive Chicago, IL 60693

Synchrony Bank/Lord & Taylor P.O. Box 965064 Orlando, FL 32896

The Bureaus Inc 650 Dundee Rd Ste 370 Northbrook, IL 60062

Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440

Wator & Zac, LLC 10711 S. Roberts Road Palos Hills, IL 60465

Women's & Childrens' Health 800 Biesterfield Road Suite 408 Elk Grove Village, IL 60007